

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

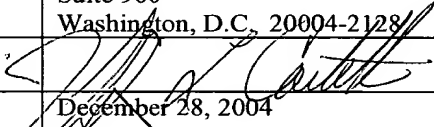
Application Number	09/651,889
Filing Date	August 30, 2000
First Named Inventor	Ritsuko KAWASAKI et al.
Group Art Unit	2814
Examiner Name	D. Farahani
Attorney Docket Number	740756-2205

Total Number of Pages in This Submission

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Request for Reconsideration / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number.

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	<b>Jeffrey L. Costellia, Reg. No. 35,483</b> Nixon Peabody LLP 401 9 <sup>th</sup> Street, N.W. Suite 900 Washington, D.C. 20004-2128
Signature	
Date	December 28, 2004

**CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]**

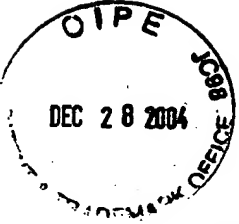
I hereby certify that this correspondence is being:

- ☐ deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop \_\_\_\_\_, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450
- ☐ transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (703) \_\_\_\_\_.

Date

Signature

Typed or printed name



Docket No. 740756-2205

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Ritsuko KAWASAKI et al.

Application No. 09/651,889

Filed: August 30, 2000

For: SEMICONDUCTOR DEVICE,  
MANUFACTURING METHOD  
THEREOF AND ELECTRONIC  
DEVICE

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Confirmation No. 2171

Group Art Unit: 2814

Examiner: Dana Farahani

December 28, 2004

**REQUEST FOR RECONSIDERATION**

Mail Stop **AMENDMENT**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed September 28, 2004, please amend the above identified application as follows:

**Remarks** begin on page 2 of this paper.